**EDWARDS & ANGELL, LLP**COUNSELLORS AT LAW
since 1894DIKE, BRONSTEIN, ROBERTS & CUSHMAN
Intellectual Property Practice GroupMARLBOROUGH, MA OFFICE
TELEPHONE (508) 485-7772WASHINGTON, DC
TELEPHONE (703) 553-2563MAILING ADDRESS:
P.O. BOX 9169
BOSTON, MA 02209101 FEDERAL STREET
BOSTON, MA 02110
(617) 439-4444
FAX (617) 439-4170RECEIVED
CENTRAL FAX CENTER
NOV 28 2003

OFFICIAL

FACSIMILE TRANSMITTAL**DATE:** November 25, 2003**TO:** U.S. Patent & Trademark Office
Examining Group 2800**FAX NO.:** 1-703-872-9319**FROM:** John B. Alexander, Ph.D.**FAX NO.:** 617-439-4170**Our Docket No.:** 55506 (70840)**No. of Pages (incl. cover):** 15**Re:** U.S. Serial Number 09/745,074**MESSAGE:**

Please enter the attached Response to Final Office Action.

NOTICE

The message and/or information which accompanies this facsimile cover sheet is intended for the addressee named above only. If you are not the intended recipient, please contact the sender by collect telephone at the number indicated. You will be advised regarding the disposition of what you have received. The mis-delivery of the message and/or information which accompanies this facsimile cover sheet is not intended to be and shall not constitute a disclosure of trade secrets, of attorney work product or of an attorney-client communication. No waiver of any privilege is intended. Thank you for your attention to this matter.

BOSTON HARTFORD NEWPORT NEW YORK PALM BEACH PROVIDENCE SHORT HILLS

Docket No. 55506 (70840)

RECEIVED
CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

NOV 28 2003

OFFICIAL

APPLICANT: Nobuyuki Itoh, et al.

U.S.S.N.: 09/745,074

Art Unit: 2871

FILED: December 20, 2001

Examiner: Timothy L. Rude

FOR: LIQUID CRYSTAL DISPLAY APPARATUS

Mail Stop: Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is a Response to the Restriction Requirement for this application.

STATUS

2. Applicant is
- [] a small entity. A statement:
- [] is attached.
- [] was already filed.
- [X] other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

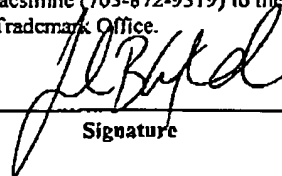
I hereby certify that, on the date shown below, this correspondence is being:

MAILING

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

FACSIMILE

- ☒ transmitted to Technology Center 2800 by facsimile (703-872-9319) to the Patent and Trademark Office.



Signature

Date: November 25, 2003

John B. Alexander, Ph.D.
(type or print name of person certifying)

(Amendment Transmittal—page 1 of 4)

EXTENSION OF TERM

NOTE: *"Extension of Time in Patent Cases (Supplement Amendments) — If a timely and complete response has been filed after a Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period."*

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1983 (1061 O.G. 34-35).

NOTE: *See 37 C.F.R. § 1.645 for extensions of time in interference proceedings, and 37 C.F.R. § 1.550(c) for extensions of time in reexamination proceedings.*

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136 apply.

(complete (a) or (b), as applicable)

(a) ☐ Applicant petitions for an extension of time under 37 C.F.R. § 1.136 (fees: 37 C.F.R. § 1.17(a)(1)-(4)) for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/>	one month	\$ 110.00	\$ 55.00
<input type="checkbox"/>	two months	\$ 380.00	\$ 190.00
<input type="checkbox"/>	three months	\$ 890.00	\$ 445.00
<input type="checkbox"/>	four months	\$ 1,360.00	\$ 680.00

Fee: \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

☐ An extension for _____ months has already been secured. The fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

(b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

(Amendment Transmittal—page 2 of 4)

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. § 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)	(Col. 3) SMALL ENTITY			OTHER THAN A SMALL ENTITY		
Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	OR	Rate	Addit. Fee
Total	Minus	20	=	x \$9 =	\$0		x \$18 =	\$
Indep.	Minus	3	=	x \$39 =	\$0		x \$78 =	\$
[] First Presentation of Multiple Dependent Claim				+ \$130 =	\$0		+ \$260 =	\$
					Total Addit. Fee	OR	Total Addit. Fee	
					\$ 0.00		\$	

* If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

WARNING: "After final rejection or action (§ 1.113) amendments may be made canceling claims or complying with any requirement of form which has been made." 37 C.F.R. § 1.116(a) (emphasis added).

(complete (c) or (d), as applicable)

- (c) [X] No additional fee for claims is required.

OR

- (d) [] Total additional fee for claims required \$ _____

FEE PAYMENT

5. [] Attached is a check in the sum of \$ _____.
 [] Charge Account No. _____ the sum of \$ _____.
 A duplicate of this transmittal is attached.

(Amendment Transmittal—page 3 of 4)

FEE DEFICIENCY

NOTE: *If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).*

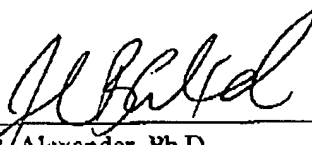
6. ☒ If any additional extension and/or fee is required, charge Account No. 04-1105.
AND/OR

☒ If any additional fee for claims is required, charge Account No. 04-1105.

Respectively submitted,

November 25, 2003

By:



John B. Alexander, Ph.D.
Reg. No. 48,399

Edwards & Angell, LLP
P.O. Box 9169
Boston, MA 02209-4280
Telephone (617) 517-5555
356333_1

(Amendment Transmittal—page 4 of 4)